

AO 435 (Rev. 04/11)		Administrative Office of the United States Courts			FOR COURT USE ONLY	
TRANSCRIPT ORDER					DUE DATE:	
<i>Please Read Instructions:</i>						
1. NAME Attorney James F. Companion			2. PHONE NUMBER (304) 233-3390		3. DATE 11/12/2015	
4. MAILING ADDRESS The Maxwell Centre; 32-20th St., Suite 500			5. CITY Wheeling		6. STATE WV	7. ZIP CODE 26003
8. CASE NUMBER 1:15CV93		9. JUDGE Irene M. Keeley		DATES OF PROCEEDINGS 10. FROM 10/19/2015 11. TO 10/19/2015		
12. CASE NAME Takeda v Mylan			LOCATION OF PROCEEDINGS 13. CITY Clarksburg 14. STATE WV			
15. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> BANKRUPTCY <input checked="" type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> OTHER						
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)						
PORTIONS		DATE(S)		PORTION(S)		DATE(S)
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)		
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)						
<input type="checkbox"/> OPENING STATEMENT (Defendant)						
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Spcy)		
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)						
<input type="checkbox"/> OPINION OF COURT						
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)		
<input type="checkbox"/> SENTENCING				Scheduling Conf Hearing		10/19/2015
<input type="checkbox"/> BAIL HEARING						
17. ORDER						
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS
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REALTIME	<input type="checkbox"/>	<input type="checkbox"/>				
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL		145.50
18. SIGNATURE /s/James F. Companion				PROCESSED BY		
19. DATE 11/12/2015				PHONE NUMBER (304) 282-0395		
TRANSCRIPT TO BE PREPARED BY Linda Bachman P.O. Box 969, Clarksburg, WV 26302				COURT ADDRESS P.O. Box 969 Clarksburg, WV 26302-0969		
ORDER RECEIVED	DATE 11/12/2015	BY LB				
DEPOSIT PAID			DEPOSIT PAID			
TRANSCRIPT ORDERED	11/12/2015	LB	TOTAL CHARGES		145.50	
TRANSCRIPT RECEIVED	11/16/2015		LESS DEPOSIT			
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED			
PARTY RECEIVED TRANSCRIPT	11/16/2015		TOTAL DUE		145.50	

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